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| Federal Communications Commission Washington, D.C. 20554 FCC 396-C | OMB 3060-1033 September 2003 | FOR FCC USE ONLY |
| Multi-Channel Video Program Distributor EEO Program Annual Report Read INSTRUCTIONS Before Filling Out Form | | FOR COMMISSION USE ONLY FILE NO. - 20171012AAE |

SECTION I IDENTIFYING INFORMATION

A. Name of Operator:

COMCAST CABLE COMMUNICATIONS, LLC

MSO Name:

COMCAST CABLE COMMUNICATIONS

B. Employment Unit's Mailing Address

1701 JFK BLVD

City

PHILADELPHIA

State

PA

Zip Code

19103-

FCC Registration Number:

0011612017

Emp. Unit ID # 11525

Application Purpose

- ☒ New Program Report
- ☐ Amendment to Program Report

☒ Supplemental Investigation Sheet (SIS) Attached

C. County and State in which unit's employment office is located

PHILADELPHIA, PA

D. Category of Respondent (check applicable box)

- ☐ Fewer than six (6) full-time employees during the selected payroll period: Complete Sections I, II and V
- ☒ Six (6) or more full-time employees during the selected payroll period: Complete ALL sections of the Form 396-C and the Supplemental Investigation Sheet, if attached

E. Pay Period Covered by this Report (inclusive dates) 8/13/2017 - 8/26/2017

F. Attachments: (See "Exhibit" buttons, below.)

SECTION II COMMUNITY INFORMATION

System Communities Comprising Local Employment Unit

| Ident No. | Name of Community | Location (State) | Type |
|-----------|-------------------|------------------|------|
|-----------|-------------------|------------------|------|

Review the list of communities served on the previous year's submission and attach as Exhibit A any additions or deletions, using the format [Exhibit 1] noted above. NOTE: APPLICABLE ONLY TO CABLE OPERATORS AND NOT TO OTHER MVPD UNITS.

SECTION III EEO POLICY AND PROGRAM REQUIREMENTS

Check YES or NO to each of the following questions. If answer to any question below is NO, attach as Exhibit B an explanation.
[Exhibit 2]

| | | |
|----|---|---|
| 1. | Have you complied with the outreach provisions of the FCC's MPVD Equal Employment Opportunity Rule, 47 C.F.R. Section 76.75(b), during the twelve month period prior to filing this form? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 2. | Do you disseminate widely your EEO Program to job applicants, employees, and those with whom you regularly do business? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 3. | Do you contact organizations, media, educational institutions, and other potential sources of applicants for referrals whenever job vacancies are available in your organization? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 4. | Do you undertake to offer promotions to positions of greater responsibility in a nondiscriminatory manner? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 5. | To the extent possible, do you seek out entrepreneurs in a nondiscriminatory manner and encourage them to conduct business with all parts of your organization? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 6. | Do you analyze the results of your efforts to recruit, hire, promote, and use services in a nondiscriminatory manner and use these results to evaluate and improve your EEO program? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 7. | Do you define the responsibility of each level of management to ensure a positive application and vigorous enforcement of your policy of equal employment opportunity and maintain a procedure to review and control managerial and supervisory performance? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 8. | Do you conduct a continuing program to exclude every form of prejudice or discrimination based upon race, color, religion, national origin, age, or sex from your personnel policies and practices and working conditions? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 9. | Do you conduct a continuing review of job structure and employment practices and maintain positive recruitment training, job design, and other measures needed to ensure genuine equality of opportunity to participate fully in all organizational units, occupations, and levels of responsibility? | <input checked="" type="radio"/> Yes <input type="radio"/> No |

SECTION IV ADDITIONAL INFORMATION

You may provide as Exhibit C any additional information that you believe might be useful in evaluating your efforts to comply with the Commission's EEO provisions. There is no requirement to provide additional data or information.
[Exhibit 3]

SECTION V CERTIFICATION

This report must be certified as follows:

A. By the individual owning the reporting system if individually owned;

- B. By a partner, if a partnership; or
 C. By an officer, if a corporation or association.

I certify that to the best of my knowledge, information and belief, all statements contained in this report are true and correct.

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| Signed | Title SVP |
| Date 10/12/2017 | Name of Respondent SANDY GUNN |
| Telephone No. (include area code) 2152864718 | |

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

FORM FCC 396-C - SUPPLEMENTAL INVESTIGATION SHEET

Part I Employee Job Descriptions

Give brief job descriptions for employees in the job categories specified below. The number specified in the box indicates the number of different job descriptions that are to be submitted for each category. Job descriptions should include the position title and a brief description of the major duties and responsibilities of the individual(s) in the position.

| | | |
|------------------------------|---|--------------|
| 1. Officials and Managers | | [Exhibit 4] |
| 2. Professionals | | [Exhibit 5] |
| 3. Technicians | | [Exhibit 6] |
| 4. Sales Workers | 1 | [Exhibit 7] |
| 5. Office and Clerical | | [Exhibit 8] |
| 6. Craft Workers (skilled) | | [Exhibit 9] |
| 7. Operatives (semi-skilled) | | [Exhibit 10] |
| 8. Laborers (unskilled) | | [Exhibit 11] |
| 9. Service Workers | | [Exhibit 12] |

Part II Inquiries Concerning EEO Program and Practices

Submit responses to the inquiries indicated by a "check" Responses should be brief, but must provide sufficient information to describe the employment unit's activity and efforts in the area of inquiry.

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|---|--------------|
| 1. <input checked="" type="checkbox"/> Describe the employment unit's efforts to comply with the outreach provisions of 47 C.F.R. Section 76.75(b). | [Exhibit 13] |
| 2. <input type="checkbox"/> Describe the employment unit's efforts to disseminate widely its equal employment opportunity program to job applicants, employees, and those with whom it regularly does business. | [Exhibit 14] |

3. ☐ Name the organizations, media, educational institutions, and other recruitment sources used to attract applicants whenever job vacancies become available. [Exhibit 15]
4. ☒ Explain the employment unit's efforts to promote in a nondiscriminatory manner to positions of greater responsibility. [Exhibit 16]
5. ☐ Describe the employment unit's efforts to encourage entrepreneurs to conduct business in a nondiscriminatory manner with all parts of its operation and provide an analysis of the results of those efforts. [Exhibit 17]
6. ☐ Report the findings of the employment unit's analysis of its efforts to recruit, hire and promote in a nondiscriminatory manner and explain any difficulties encountered in implementing its EEO program. [Exhibit 18]
7. ☒ Describe the responsibility of each level of the employment unit's management with respect to application and enforcement of its EEO policy and explain the procedure for review and control of managerial and supervisory performance. [Exhibit 19]
8. ☐ Describe the manner in which the employment unit conducts its continuing review of job structure and employment practices. [Exhibit 20]
9. ☐ Other Inquiries: [Exhibit 21]

Part III EEO Public File Report

Attach a copy of the EEO public file report from the previous year. Cable entities are required to place annually such information as is required by 47 C.F.R. Section 76.1702 in their public files. [Exhibit 22]

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| EMP UNIT ID: 11525 | MSO NAME: COMCAST CABLE COMMUNICATIONS |
| | OPR NAME: COMCAST CABLE COMMUNICATIONS, LLC |

Approved by OMB
3060-1033

Exhibits

Exhibit 7

Description: UNIT #11525 EXHIBIT 7 JOB DESCRIPTION

Attachment 7

| Description |
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| Unit # Exhibit 7 Job Description |

Exhibit 13

Description: UNIT # 11525 EXHIBIT 13 Q1

Attachment 13

| Description |
|--------------------------------------|
| Unit # Exhibit 13 Q1 |

Exhibit 16**Description:** UNIT #11525 EXHIBIT 16 Q 4**Attachment 16**

| Description |
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| Unit # Exhibit 16 Q 4 |

Exhibit 19**Description:** UNIT #11525 EXHIBIT 19 Q7**Attachment 19**

| Description |
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| Unit # Exhibit 19 Q7 |

Exhibit 22**Description:** UNIT#11525 EXHIBIT 22 PFR**Attachment 22**

| Description |
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| Unit# Exhibit 22 PFR |